## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**CLAIMS AS FILED - PART I** 

Application or Docket Number

19045662

· SMALL ENTITY

OTHER THAN

|   |  |   | (Column 1)                   |                      | (Column 2)                   |                  | , 1        | TYPE                |                        | OR      | SMALL                                  | ENTITY                 |
|---|--|---|------------------------------|----------------------|------------------------------|------------------|------------|---------------------|------------------------|---------|--|------------------------|
| TOTAL CLAIMS  |  |   | 31                           |                      |                              |                  |            | RATE                | FEE                    |         | RATE                                   | FEE                    |
| FOR   |  |   | NUMBER FILED                 |                      | NUMBER EXTRA                 |                  |            | BASIC FEE           | 370.00                 | OR      | BASIC FEE                              | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 4 minus 20=                  |                      | *                            |                  |            | X\$ 9=              |                        | OR      | X\$18=                                 | 198                    |
| INDEPENDENT CLAIMS  |  |   | 9 minus 3 =                  |                      | * 9                          | 2                |            | X42=                |                        | OR      | X84= .                                 | 168                    |
| MU  | LTIPLE DEPEN   | DENT CLAIM PR                             | RESENT                       |                      |                              |                  |            | +140=               |                        | OR      | +280=                                  |                        |
| * If  | the difference   | in column 1 is l                          | less than zero, enter "0" in |                      |                              | olumn 2          | 1          | TOTAL               |                        | OR      | TOTAL                                  |                        |
| 02/27/06blumn 1) (Column 2) (Column 3)  |  |   |                              |                      |                              |                  |            | SMALLE              | NTITY                  | OR      | OTHER<br>SMALL I                       |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                              | PREVI                | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •2Ø                                       | Minus                        | -3                   | 7                            | = Ø              |            | X\$ 9=              |                        | OR      | ************************************** | $\varnothing$          |
|   | Independent  | * /                                       | Minus                        | *** E                | <u> </u>                     |                  | ┦┨         | X42=                |                        | OR      | <b>3.2</b>                             | Ø                      |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                              |                      |                              |                  |            | +140=               |                        | OR      | + <del>280</del> =                     |                        |
|   |  |   |                              |                      |                              |                  |            | TOTAL<br>ADDIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE                    | Ø                      |
|   |  | (Column 1)                                |                              | (Colu                | mn 2)                        | (Column 3)       |            |                     |                        | =       |  |                        |
| AMENDIMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                              | HIGI<br>NUM<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus                        | **                   |                              | =                |            | X\$ 9=              |                        | OR      | X\$18=                                 |                        |
|   | Independent  | *   | Minus                        | ***                  | <del>-</del> 0: 4:44         | -                | 4          | X42=                |                        | OR      | X84=                                   |                        |
| L   | FIRST PRESE  | NTATION OF MU                             | JLTIPLE DEF                  | ENDEN                | CLAIM                        |                  |            | +140=               |                        | OR      | +280=                                  |                        |
|   |  |   |                              |                      |                              |                  |            | TOTAL               |                        | OR      | TOTAL                                  |                        |
|   |  |   |                              |                      |                              |                  |            | ADDIT. FEE          |                        | J       | ADDIT. FEE                             |                        |
|   | (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  |   |                              |                      |                              |                  |            |                     |                        | 1       |  |                        |
| AMENDMENT C   | All Signs Si | REMAINING<br>AFTER<br>AMENDMENT           |                              | NUA<br>PREVI         | MBER<br>HOUSLY<br>FOR        | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                        | **                   |                              | -                | <b>↓</b> ∣ | X\$ 9=              |                        | OR      | X\$18=                                 |                        |
|   | Independent  | *   | Minus                        | ***                  | - O. A.                      | -                | ┦┃         | X42=                |                        | OR      | X84=                                   |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                              |                      |                              |                  |            |                     |                        |         | .000                                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.                 |  |   |                              |                      |                              |                  |            |                     |                        | OR      | +280=                                  |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE |  |   |                              |                      |                              |                  |            |                     |                        | OR      | ADDIT. FEE                             |                        |
|   | The "Highest Nurr  | nber Previously Pa                        | id For (Total o              | r Independ           | deni) is the                 | highest numb     | per fou    | and in the app      | propriate bo           | k in co | olumn 1.                               |                        |